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| | | | | | 12-04-20 | 06 | | (Date) |
| APPLICATION NO. | FILING DATE | | | FIRST NAMED INVEN | ITOR | ATTO | RNEY DOCKET NO. | CONFIRMATION NO. |
| 09/242,525 ITLE OF INVENTION: | 02/17/1999 PROCESS FOR THE | PREPA | RATION OF URI | SHINICHI SATO | | SIN COM | 11301-1480 . IPOSITIONS | 1170 |
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| Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| ASSIGNEE NAME AN | ND RESIDENCE DAT. | А ТО В | E PRINTED ON | | | | | |
| | ess an assignee is ident in 37 CFR 3.11. Com | | | data will appear on t T a substitute for filin | he patent. If an ass g an assignment. | | | ocument has been filed for |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Konishi Co., Ltd. Osaka, Japan | | | | | | | | |
| ease check the appropri | ate assignee category or | catego | ries (will not be pr | rinted on the patent): | ☐ Individual ☐ | Corporat | ion or other private gro | up entity Government |
| A. The following fee(s) are submitted: State Issue State State | | | | b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-0778 (enclose an extra copy of this form). | | | | |
| | SMALL ENTITY state | us. See | 37 CFR 1.27. | ☐ b. Applicant is no | o longer claiming SN | IALL EN | TITY status. See 37 CF | |
| Authorized Signature | ecords of the United Sta | ites Pat | ent and Trademark | Office. | Date | 12/ | 4/06 | |
| Typed or printed name | George M | mh | Omas | | Registratio | n No | 22 260 | |

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